Request For Continued Examination (RCE) Transmittal Address to: Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandra, VA 22313-1450	Application Number	10/576,748	
	Filing Date	February 15, 2007	
	First Named Inventor	Robert H. Stouffs et al. 1781 8191	
	Group Art Unit		
	Conf No.		
	Examiner Name	Elizabeth A. Gwartney	
	Attorney Docket Number	19790-0008US1	

Submission required under 37 C.F.R. §1.114 Note: If the RCE is proper, any previously filed unentered amendments and

This is a Request for Continued Examination (RCE) under 37 C.F.R. §1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs front to be submitted to the USPTO) on page 2.

	enclosed with the RCE will be entered in the ord not wish to have any previously filed unentered						
Previously submitted. If a final Office action is outstanding, any amendment filed after the final Office action may be considered as a submission even if this box is not checked.							
i. Consider the arguments in the Appeal Brief or Reply Brief previously filed on							
ii. 🗆 O	ther						
b. 🛮 Enclosed	ı						
i. 🛛 Aı	mendment/Reply	iii.		Information Dis	sclosure Statement (IDS)		
ii. 🔲 Af	fidavit(s)/Declaration(s)	iv.	\boxtimes	Other Extensi	on of Time		
Suspension of action on the above-identified application is requested under 37 C.F.R. §1.103(c) for a period of months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. §1.17(i) required) D. □ Other							
The RCE fee under 37 C.F.R. §1.17(e) is required by 37 C.F.R. §1.114 when the RCE is filed. The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 06-1050							
i. 🛛 RCE fee required under 37 CFR 1.17(e)							
ii. ☑ Extension of time fee (37 CFR 1.136 and 1.17)							
iii. 🛛 Other <u>Any deficiencies</u>							
b. Check in the amount of \$ enclosed							
c. Payment by credit card (Form PTO-2038 enclosed)							
	SIGNATURE OF APPLICANT, ATTORNEY OR AGENT REQUIRED						
Name (Print/Type)	M. Angela Parsons, Ph.D.		ation No. (Attorney/Agent) 44,282				
Signature	/M. Angela Parsons/	Date	/Septemb	er 20, 2011/	J		

CERTIFICATE OF MAILING BY EFS-WEB FILING